

# CITY OF BURLINGTON PLANNING DEPARTMENT

## SUBDIVISION PLAT APPLICATION

### CHECK APPROPRIATE BOXES:

- ☐ Preliminary Plan
- ☐ Final Plat
- ☐ Class A Subdivision
- ☐ Class B Subdivision
- ☐ Inside City Limits
- ☐ Within City's Extraterritorial Jurisdiction

	FINAL PLAT	PRELIMINARY PLAN
Required Documents	Original or mylar, sepia transparency and 10 copies of final plat. All improvements completed and inspected or remaining improvements assured by certified or cashier's check in amount of 125% of estimated cost of completion.	10 copies of Preliminary Plan (two must show proposed water/sewage disposal system if applicable); four copies of street plans, profiles, typical cross sections with drainage plan; and draft of protective covenants if applicable.
City Fees	1 to 5 lots - \$30.00 6 or more lots - \$75.00 Check payable to <u>City of Burlington</u>	1 to 5 lots - \$25.00 6 or more lots - \$100.00 plus \$20.00 per lot - Check payable to <u>City of Burlington</u>
Recording Fees	\$21.00 payable to <u>Alamance County Register of Deeds</u> or \$23.00 to <u>Guilford County Register of Deeds</u> if property is located within Guilford County	None

Name of Subdivision \_\_\_\_\_

Subdivision Location \_\_\_\_\_

Tax Map Designation: ACTM \_\_\_\_\_

Total Acreage \_\_\_\_\_ Zoning District \_\_\_\_\_ Number of Lots \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Area Code/Daytime Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

Owner of Record \_\_\_\_\_ Area Code/Daytime Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

Engineer \_\_\_\_\_ Area Code/Daytime Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

Land Surveyor \_\_\_\_\_ Area Code/Daytime Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

Attorney \_\_\_\_\_ Area Code/Daytime Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

(over)

Has the Board of Adjustment granted a variance, exception or Special Use Permit on this property? \_\_\_\_\_

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Has the Burlington City Council granted a variance on this property? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

\_\_\_\_\_

List all contiguous holdings in the same ownership:

ACTM \_\_\_\_\_

ACTM \_\_\_\_\_

ACTM \_\_\_\_\_

*I certify that all information furnished in this application is true to the best of my knowledge. Further, this is authorization for the City Engineer to record the final plat and protective covenants, if any.*

Signature \_\_\_\_\_

Date \_\_\_\_\_

Date Received \_\_\_\_\_

Application Fee \$ \_\_\_\_\_

Recording Fee \$ \_\_\_\_\_